

U.S. Department of Veterans Affairs
Veterans Benefits Administration

SURVEY OF VETERANS SATISFACTION with the VA VOCATIONAL REHABILITATION AND EMPLOYMENT PROGRAM

Thank you for your help with this important project. This booklet contains questions about your recent experience with VA's Vocational Rehabilitation and Employment (VR&E) Program. Please base your answers only on your most recent experience with this program (Chapter 31).

Please read and answer the following question first.

According to their records, VA shows that you are currently participating in **VA's Vocational Rehabilitation and Employment Program (VR&E)**, OR have participated in the past. Is this true?

- ☐ No (STOP. You do not have to complete the rest of this questionnaire, but please return the questionnaire in the enclosed postage-paid envelope.)
- ☐ Yes (Continue on to next question.) _____

According to their records, VA shows that you are in the JOB READY phase of your program, OR have recently completed this phase. Is this true?

- ☐ No (STOP. You do not have to complete the rest of this questionnaire, but please return the questionnaire in the enclosed postage-paid envelope.)
- ☐ Yes (Continue to instructions on the next page of the booklet, complete the rest of the questionnaire as soon as possible, and mail it in the enclosed postage-paid envelope.)

Again, we thank you for helping VA provide better service to veterans.

[illegible]

DO NOT WRITE IN THIS AREA

INSTRUCTIONS

The survey will take about 20 minutes to complete.

Please read each question carefully and respond by filling in the oval of the response that most closely represents your opinion.

Correct Mark



Incorrect Marks



- Use pencil or pen. Make heavy dark marks that fill the ovals completely. If you wish to change an answer, erase cleanly (pencil), or put an "X" over the incorrect response (pen).
- Fill in one answer circle for each question unless it tells you to "*mark all that apply*". (See example below)
- When you are finished, please place the questionnaire in the enclosed postage-paid envelope and put it in the mail.

Example:

34. Were you generally able to get the information you needed on the first call or contact?

- ☒ Yes
☐ No

Please watch for "SKIP" instructions—they tell you when to skip over a group of questions that you do not need to answer.

OMB Control Number 2900-0569 Public Reporting Burden Statement

VA may not conduct, sponsor, or require the respondent to respond to this collection of information unless it displays a valid OMB Control Number. All responses for this collection are voluntary. Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time necessary for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information collected is intended for the improvement of services within the VA benefits processing system and associated administrative purposes. Failure to furnish the requested information will have no adverse effect on any VA benefit to which you may be entitled.

The information you supply will be confidential and protected by the Privacy Act of 1974 (5 U.S.C. 522a) and the VA's confidentiality statute (38 U.S.C. 5701) as implemented by 38 CFR 1.526(a) and 38 CFR 1.576(b). Disclosure of information involves releases of statistical data and other non-identifying data for the improvement of services within the VA benefits processing system and associated administrative purposes. If you have comments regarding this burden estimate or any aspects of this collection of information, call 1-800-827-1000 for mailing information on where to send your comments.

BACKGROUND INFORMATION ABOUT YOUR VOCATIONAL REHABILITATION PROGRAM

1. Did your vocational rehabilitation program include an education/training phase?

- ☐ Yes (GO ON to Q 2)
- ☐ No (**SKIP** to Q 5)

2. What type of education/training was this?

- ☐ College or university classes
- ☐ Technical or vocational training
- ☐ On-the-job training

3. Have you completed the education/training phase of your program?

- ☐ Yes (GO ON to Q 4)
- ☐ No (**SKIP** to Q 5)

4. How long has it been since you completed the educational/training phase of your vocational rehabilitation program?

- ☐ Less than 3 months
- ☐ 3 months to 6 months
- ☐ More than 6 months to 1 year
- ☐ More than 1 year to 18 months
- ☐ More than 18 months to 2 years
- ☐ More than 2 years to 3 years
- ☐ More than 3 years

5. How satisfied are you with the occupational/vocational goal you and your counselor selected during the planning phase of your program?

- ☐ Very satisfied
- ☐ Somewhat satisfied
- ☐ Neither satisfied nor dissatisfied
- ☐ Somewhat dissatisfied
- ☐ Very dissatisfied

6. Who is (was) your primary counselor or employment specialist assigned to you during the job ready phase of your program?

- ☐ A VA staff counselor (GO ON to Q 7)
- ☐ A VA staff employment specialist (GO ON to Q 7)
- ☐ A counselor under contract with VA (GO ON to Q 7)
- ☐ An employment specialist under contract with VA (GO ON to Q 7)
- ☐ A Disabled Veterans Outreach Program (DVOP) counselor (**SKIP** to Q 39, page 5)
- ☐ Don't know (GO ON to Q 7)
- ☐ Don't have a counselor or specialist assigned (**SKIP** to Q 39, page 5)

7. Is this the same specialist/counselor who was assigned to you during the training or educational phase of your program?

- ☐ Yes
- ☐ No
- ☐ Don't know
- ☐ Didn't have training/educational phase

KNOWLEDGE AND USE OF EMPLOYMENT SERVICES

8. How completely did your counselor explain all the benefits and services available to you during the job ready phase of your program?
- ☐ Completely
 - ☐ Mostly
 - ☐ Somewhat
 - ☐ Only a little
 - ☐ Not at all
9. Have you and your counselor developed a plan (Individualized Employment Assistance Plan) to guide you in your job search?
- ☐ Yes
 - ☐ No, but in the process of developing such a plan
 - ☐ No
 - ☐ Don't know
10. Which of the following types of employment services did you need? (Mark all that apply.)
- ☐ Resumé preparation or development
 - ☐ Interview skills
 - ☐ Help in obtaining licenses or certificates
 - ☐ Job hunting strategies
 - ☐ Grooming/personal appearance tips
 - ☐ Setting up informational interviews with prospective employers
 - ☐ Didn't need any of the above from counselor
11. Which of the following types of employment services has your counselor provided? (Mark all that apply.)
- ☐ Resumé preparation or development
 - ☐ Interview skills
 - ☐ Help in obtaining licenses or certificates
 - ☐ Job hunting strategies
 - ☐ Grooming/personal appearance tips
 - ☐ None
12. Which of the following potential employment opportunities or referrals has your counselor provided? (Mark all that apply.)
- ☐ Referrals to state rehabilitation and employment agencies
 - ☐ Referrals to private employment specialists
 - ☐ Referrals to potential employers
 - ☐ Referrals to federal job market
 - ☐ References to an electronic job bank on the Internet
 - ☐ Referrals to other sources of assistance
 - ☐ Direct job placement
 - ☐ None
13. Other than your counselor, which other sources of employment information have you used? (Mark all that apply.)
- ☐ VHA (Veterans Health Administration)
 - ☐ VET Center
 - ☐ DVOP (Disabled Vets Outreach Program)
 - ☐ DOD (Department of Defense)
 - ☐ SBA (Small Business Administration)
 - ☐ State rehabilitation agencies
 - ☐ State employment agencies
 - ☐ Private employment specialists
 - ☐ Internet job searches
 - ☐ Newspaper/help-wanted advertisements
 - ☐ Job fairs
 - ☐ College/university or school
 - ☐ Personal/professional contacts
 - ☐ Federal job listings
 - ☐ None

Please answer the following questions in reference to your current or most recent experience with the VR&E program. Even if you are not currently participating in the program, please answer based on your most recent experience.

By filling in the appropriate circle, please indicate whether you Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, or Strongly Disagree with the following statements regarding your employment services specialist or counselor:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not applicable
14. Your counselor gives you good information and advice.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Your counselor is knowledgeable regarding job search methods and techniques.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Your counselor is knowledgeable regarding employment markets.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Your counselor has provided assistance according to your individual needs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Your counselor understands your vocational goals.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. Your counselor shows a caring and compassionate attitude toward you.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. Your counselor listens to your needs and concerns.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. Your counselor has a communication style that is easy to understand.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. Your counselor is flexible.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. Your counselor is resourceful.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. Your counselor is available when needed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. Your counselor is concerned about the quality of your job placement.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

CONTACT WITH YOUR COUNSELOR

26. Do you have scheduled in-person meetings with your counselor?
- ☐ Yes (GO ON to Q 27)
 - ☐ No (**SKIP** to Q 31)
27. Are the number and length of these sessions adequate to meet your counseling needs?
- ☐ Yes
 - ☐ No, too little contact with counselor
 - ☐ No, too much contact with counselor
28. In general, how much of what you NEEDED TO KNOW did you get from these meetings?
- ☐ All
 - ☐ Most
 - ☐ Some
 - ☐ Little
 - ☐ None
29. How convenient is the LOCATION where these meetings are held?
- ☐ Very convenient
 - ☐ Somewhat convenient
 - ☐ Neither convenient nor inconvenient
 - ☐ Somewhat inconvenient
 - ☐ Very inconvenient
30. In general, how convenient is the TIME scheduled for these meetings?
- ☐ Very convenient
 - ☐ Somewhat convenient
 - ☐ Neither convenient nor inconvenient
 - ☐ Somewhat inconvenient
 - ☐ Very inconvenient
31. Aside from scheduled visits, what is the primary method you use to contact your counselor?
- ☐ Phone, 1-800 number
 - ☐ Phone, long-distance number
 - ☐ Phone, local number
 - ☐ Fax
 - ☐ E-mail (computer)
 - ☐ Letter
 - ☐ Unannounced visit
 - ☐ Did not need additional communication (**SKIP** to Q 37, page 5)
32. How responsive was your counselor to your contact through this method?
- ☐ Very responsive
 - ☐ Somewhat responsive
 - ☐ Neither responsive nor unresponsive
 - ☐ Somewhat unresponsive
 - ☐ Very unresponsive
33. In general, how much of what you NEEDED TO KNOW did you get from this method of contact?
- ☐ All
 - ☐ Most
 - ☐ Some
 - ☐ Little
 - ☐ None
34. Were you generally able to get the information you needed on the first call or contact?
- ☐ Yes
 - ☐ No
35. Were you able to access voice mail in order to leave your counselor a message?
- ☐ Yes, counselor returned call
 - ☐ Yes, counselor did not return call
 - ☐ No, not able to access voice mail
 - ☐ Never tried

36. Did your counselor fully address all your questions, concerns, or complaints?

- ☐ Yes
- ☐ No
- ☐ Did not have any

37. Did your counselor provide assistance throughout your job search?

- ☐ Yes
- ☐ No
- ☐ Did not need job search assistance

38. Did your counselor monitor your progress throughout your job search?

- ☐ Yes
- ☐ No

39. After you completed your rehabilitation plan and became job ready, how satisfied are/were you overall with the services provided to assist you in obtaining a job?

- ☐ Very satisfied
- ☐ Somewhat satisfied
- ☐ Neither satisfied nor dissatisfied
- ☐ Somewhat dissatisfied
- ☐ Very dissatisfied
- ☐ Didn't need services

40. How satisfied are/were you with the employment services you've received during your entire program?

- ☐ Very satisfied
- ☐ Somewhat satisfied
- ☐ Neither satisfied nor dissatisfied
- ☐ Somewhat dissatisfied
- ☐ Very dissatisfied

CURRENT EMPLOYMENT STATUS

41. What is your current employment status?

- ☐ Currently employed*, not looking for a different job (GO ON to Q 42)
- ☐ Currently employed*, but looking for a different job (GO ON to Q 42)
- ☐ Not working but looking for work (**SKIP** to Q 49, page 6)
- ☐ Not working and not looking for work (**SKIP** to Q 49, page 6)

*Includes full-time, part-time, or self-employed

42. Has the VA's Vocational Rehabilitation Program determined that you are suitably employed?

- ☐ Yes
- ☐ No
- ☐ Don't know

43. How long did it take from the time you completed the educational/training phase of your vocational rehabilitation program until you started your current job?

- ☐ Less than 1 month
- ☐ 1 month to 2 months
- ☐ More than 2 months to 3 months
- ☐ More than 3 months to 4 months
- ☐ More than 4 months to 5 months
- ☐ More than 5 months to 6 months
- ☐ More than 6 months to 1 year
- ☐ More than 1 year to 18 months
- ☐ More than 18 months to 2 years
- ☐ More than 2 years to 3 years
- ☐ More than 3 years
- ☐ Started current job before completing educational/training phase
- ☐ Never completed educational/training phase
- ☐ Never had educational/training phase

44. How REASONABLE was the length of time it took you to find a job?

- ☐ Very reasonable
- ☐ Somewhat reasonable
- ☐ Neither reasonable nor unreasonable
- ☐ Somewhat unreasonable
- ☐ Very unreasonable

45. Does this job meet your rehabilitation needs?

- ☐ Yes
- ☐ No

46. Does this job suit your skills and abilities?

- ☐ Yes
- ☐ No

47. Does this job match the occupational/vocational goal you and your counselor selected during the planning phase of your program?

- ☐ Yes
- ☐ No

48. How helpful was your employment specialist/counselor in helping you find your current job?

- ☐ Very helpful
- ☐ Somewhat helpful
- ☐ Neither helpful nor unhelpful
- ☐ Somewhat unhelpful
- ☐ Not at all helpful
- ☐ Didn't need help

ACCESS TO THE VR&E PROGRAM

49. Looking back to your contacts with the VR&E program thus far, which methods of contact did you EVER use? (Mark all that apply.)

- ☐ In-person visit
- ☐ Phone, 1-800 number
- ☐ Phone, long-distance number
- ☐ Phone, local number
- ☐ Fax
- ☐ Internet, e-mail, or website
- ☐ Letter
- ☐ None

50. In general, how easy was it for you to obtain information from the VR&E program?

- ☐ Very easy
- ☐ Somewhat easy
- ☐ Neither easy nor difficult
- ☐ Somewhat difficult
- ☐ Very difficult

51. Which method of contact with the VR&E program would you prefer, if you could get the same degree of service? (Mark only one.)

- ☐ Local in-person visit
- ☐ Phone, 1-800 number
- ☐ Phone, long-distance number
- ☐ Phone, local number
- ☐ Fax
- ☐ Internet, e-mail, or website
- ☐ Letter

CURRENT STATUS IN THE VR&E PROGRAM

52. How would you best describe your current status with regard to the VA VR&E program:

- ☐ VA requested I interrupt program
(GO ON to Q 53)
- ☐ VA requested I withdraw from program
(GO ON to Q 53)
- ☐ I voluntarily interrupted program
(SKIP to Q 54, page 7)
- ☐ I voluntarily withdrew from program
(SKIP to Q 54, page 7)
- ☐ I am currently pursuing program
(SKIP to Q 56, page 7)
- ☐ I have completed the program
(SKIP to Q 56, page 7)

53. Did VA tell you the reasons why you were interrupted or withdrawn from the VR&E employment services program?

- ☐ Yes
- ☐ No
- ☐ Don't know

54. Why did you interrupt or withdraw from the VR&E employment services program?
(Mark all that apply.)

- ☐ Medical problems
- ☐ Disability
- ☐ Financial difficulties
- ☐ VA requested that I interrupt or withdraw from program
- ☐ Found job on my own
- ☐ Too much red tape
- ☐ Employment services were not helpful
- ☐ Moved/planning to move
- ☐ Family responsibilities/difficulties
- ☐ Program did not meet my needs
- ☐ Problems with counselor

55. Do you plan to complete your rehabilitation program now or at some later date?

- ☐ Yes
- ☐ No
- ☐ Not sure

OVERALL IMPRESSIONS

56. Thus far, how well has the VA's VR&E program met your expectations?

- ☐ Much better than expected
- ☐ Better than expected
- ☐ Just as expected
- ☐ Worse than expected
- ☐ Much worse than expected

57. Overall, did the VR&E program meet your rehabilitation needs?

- ☐ Yes
- ☐ No

58. Have your CAREER goals been raised, lowered, or unaffected as a result of your interaction with the VR&E program?

- ☐ Raised
- ☐ Lowered
- ☐ Unaffected

59. Are your career goals more realistic as a result of the program?

- ☐ Yes
- ☐ No
- ☐ Don't know

60. At this time, would you say that your career goals have been met?

- ☐ Yes
- ☐ No
- ☐ Don't know

Please answer the following questions in reference to your current or most recent experience with the VR&E program. Even if you are not currently participating in the program, please answer based on your most recent experience.

61. Overall, how satisfied are you with VA's VR&E program?

- ☐ Very satisfied
- ☐ Somewhat satisfied
- ☐ Neither satisfied nor dissatisfied
- ☐ Somewhat dissatisfied
- ☐ Very dissatisfied

62. Which of the following VR&E services were the most helpful? (Mark all that apply.)

- ☐ Evaluation, testing and planning your rehabilitation program
- ☐ Payment of tuition, fees, books, supplies and/or monthly subsistence
- ☐ Personal contact with counselor(s)
- ☐ Identification of medical and other rehabilitation issues
- ☐ Education/training
- ☐ Help in finding a job
- ☐ None

63. Which of the following VR&E services did you need the most? (Mark all that apply.)

- ☐ Evaluation, testing and planning your rehabilitation program
- ☐ Payment of tuition, fees, books, supplies and/or monthly subsistence
- ☐ Personal contact with counselor(s)
- ☐ Identification of medical and other rehabilitation issues
- ☐ Education/training
- ☐ Help in finding a job
- ☐ None

64. Would you recommend this program to other disabled veterans?

- ☐ Yes
- ☐ No

***This column intentionally left blank.
Go on to Question 65, page 9.***

Page 9

[illegible]

Survey & Ballot Systems, Inc.
7653 Anagram Drive
Eden Prairie, MN 55344



DO NOT WRITE IN THIS AREA